

2025 Summary of benefits



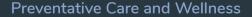
Administered by



CompCare Medical Scheme is administered by Universal Healthcare Administrators (Pty) Ltd.



ExecuCare Plus offers elite cover with unlimited private hospital and private ward stays, superior day-to-day benefits, and an extensive Above Threshold Benefit for peace of mind.



Receive an extra R40 000 in benefits through the Care Maximiser and Preventative Care benefits. Early detection screenings and checkups to help you live your best life.

Premium Day-to-Day Benefits

Generous cover for out-of-hospital costs like GP visits, medicines, radiology, pathology and dental care, helping to manage everyday expenses.

Comprehensive Chronic Cover

Covers 27 Chronic Disease List (CDL) conditions plus 47 additional chronic conditions, ensuring long-term health management.

Private Hospital Access

ExecuCare Plus provides access to any private hospital of your choice.

ExecuCare Plus	Principal member	Adult dependant	Child dependant
Contribution	R10 978	R9 880	R3 842
AFB	R22 050	R16 800	R6 100
SPG	R5 000	R3 000	R1 000
Threshold	R27 050	R19 800	R7 100
ATB	R11 250 per beneficiary to a maximum of R23 000 per family.		

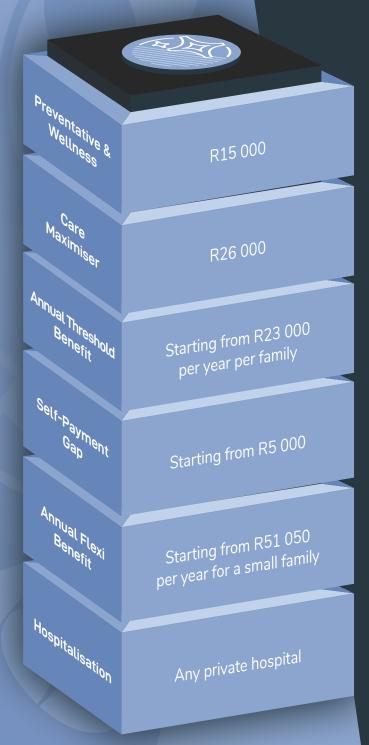
Child rates apply until the child turns 21 years. Members only pay for a maximum of 3 children.



Scan to apply online



Scan to speak to an independent adviser to join



Speciality Healthcare Bundles

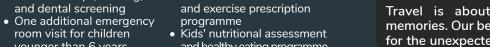
Our speciality bundles provide personalised healthcare enhancements for every life stage, tailored to children, men, and women. These benefits support active lifestyles and emotional well-being, with some funded by the Care Maximiser.



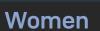
Kids

We take special care of the little ones with our unique range of kids benefits.

- Newborn hearing screening benefit
- Newborn congenital hypothyroidism test
- Baby wellness visits
- Childhood immunisations
- School readiness assessments
- Pre-school eye, hearing, and dental screening
- room visit for children younger than 6 years
- Three additional paediatric consultations
- Unlimited GP consultations and basic dentistry for children younger than 6 years
- Initial occupational therapy consultation
- Kids' fitness assessment
- and healthy eating programme







We support women's health with tailored benefits for professionals and growing families.

- Antenatal classes and visits
- Maternity bag
- Confinements including 2D ultrasound scans
- Breast pump per pregnancy
- One additional nutritional and fitness assessment per pregnancy
- Contraceptives
- HPV (Cervical Cancer) vaccine

- Access to all Preventative Care benefits
- Access to all Active Lifestyle **Programmes**
- Access to all Emotional Wellness benefits

- Papsmear screening
- Mammogram

Men

We recognise men's diverse health needs. Our benefits enhance wellbeing for young professionals, family men, and executives.

- Prostate-specific antigen (PSA) blood test
- Access to all Preventative Care benefits
- Access to all Active Lifestyle Programmes
- Access to all Emotional Wellness benefits



Preventative Care Benefits

We prioritise prevention, offering extensive care benefits for proactive health, all paid from risk.

- Health check: Blood pressure, blood sugar, cholesterol, BMI and waist circumference
- Rapid HIV test
- Flu vaccine
- Tetanus vaccine
- Glaucoma test
- Colorectal cancer screening
- Lipogram

Emotional Wellness

We provide comprehensive emotional wellness support for our members.



- Psychiatric and psychological treatment in and out of hospital
- Alcoholism, drug dependence and narcotics
- Psychosocial counselling with unlimited telephonic counselling including 3 face-to-face sessions

Travel Cover

Travel is about adventure and creating memories. Our benefits ensure you're covered for the unexpected.



- Preventative Malaria medication
- Travel vaccinations such as Yellow Fever, Typhoid Fever, Hepatitis A, Rabies and Meningococcal disease
- International travel cover for emergency medical costs (via Universal Rewards)

Professional and Adventure Sports Cover



Embracing adventure and professional sports, our benefits protect you against unexpected injuries.

- Unlimited emergency evacuation, including airlifts
- Emergency search and rescue
- Hospitalisation due to professional sport injuries are covered at 100% of the scheme rate

Active Lifestyle Programmes



Benefits to support you in attaining your health and fitness goals.

- Fitness assessment and exercise prescription: Access to the Universal Network of biokineticists for annual fitness assessment, virtual consultations, exercise prescription and regular monitoring
- Nutritional assessment and healthy eating plan: Access to the Universal Network of dietitians for annual assessment, virtual consultations, healthy eating plan prescription, and regular monitoring





Preventative Care and Wellness Benefits

Enjoy the comprehensive preventative care and wellness benefits to proactively manage your health. From routine screenings and vaccinations to personalised nutrition plans and fitness support, we help you to stay healthy and prevent illness without having to use your day-to-day benefits.

Total value in addition to your day-to-day benefits	R15 000
 Essential health tests Blood pressure, blood sugar, cholesterol, BMI and waist circumference: One measurement per beneficiary over the age of 18 years, limited to R287 per event. Only at DSP pharmacy. 	✓
Rapid HIV tests As required.	✓
Prophylaxis for malaria Preventative medicine as required.	✓
Flu vaccine One per beneficiary per annum.	✓
Tetanus vaccine One injection when required.	✓
PSA (Prostate Specific Antigen) One test per male beneficiary over the age 40.	✓
Bowel cancer screening test One test every 24 months (from date of service) for beneficiaries between the ages of 45 and 75.	✓
Glaucoma test One per beneficiary per annum.	✓
Lipogram One fasting lipogram per beneficiary over the age of 20 years. Once every five years.	✓
Pap smear One test per female beneficiary over the age of 18 per annum.	✓
Mammogram One test per female beneficiary over the age of 35 every second year.	✓
HPV (cervical cancer) vaccine One course per female beneficiary between 12 and 18 years of age per lifetime.	✓
Adult and child pneumococcal vaccine Per beneficiary as required, subject to pre-authorisation and protocols.	✓
 Fitness assessment and exercise prescription Access to Universal's Network of biokineticists for annual fitness assessments, virtual consultations, exercise prescription and regular monitoring. One additional assessment per pregnant member per pregnancy. Strict protocols apply. 	✓
 Nutritional assessment and healthy eating plan Access to Universal's Network of dietitians for annual assessment, virtual consultations, healthy eating plan prescription and regular monitoring. One additional assessment per pregnant member per pregnancy. Strict protocols apply. 	✓
Travel vaccinations such as Yellow Fever, Hepititis A, Rabies and Meningococcal disease Per beneficiary as required.	1



Care Maximiser



Unlock additional benefits with our Care Maximiser. Designed to help you stretch your benefits further, the Care Maximiser ensures that you get more value from CompCare - because your health deserves more.

Unlocking your Care Maximiser is easy.

To activate your Care Maximiser benefit, all you need to do is go for your essential health test.

All adult beneficiaries on your medical aid plan need to go for the following health tests at any of our DSP pharmacies:

Blood pressure measurement

Blood sugar test Cholesterol test BMI and waist circumference

Two virtual consultations (including acute medicine) - Universal Network applies.

Unlimited nurse advice online chats.

GP wellness consultation: One visit PB per annum - excluding procedures. Limited to tariff code 0190/1/2 and ICD10 Z00.0 or Z00.1.

Unlimited GP visits for children <6 years old.

Unlimited basic dentistry for children <6 years old.

Emergency room visit for children <6 years old.

Contraceptives up to the age of 55 years (Oral/IUD device).

Covid benefit

- Pulse Oximeter: R850 per family
- Nebulizer: R550 per family
- Thermal Thermometer: R450 per family

Home test bundle

- One Covid test
- One urinary tract test
- One ovulation test
- One pregnancy test

Antenatal visits with a GP, specialist or midwife.

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To a maximum of R1 550 per event, if not a PMB.

13 scripts to a maximum of R3 540, OR an IUD to a maximum of R3 540.

To the maximum value of R1 850.

Overall limit of R350

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100% of the scheme rate. 12 antenatal visits.



Day-to-Day Benefits



Day-to-day benefits cover routine healthcare costs such as GP visits, prescription medicine, dental check-ups, radiology, pathology and optometry.

How are these benefits covered?



Annual Flexi Benefit (AFB)

The AFB is an insured benefit. Fixed amounts cover day-to-day medical expenses. These benefits are subject to specific limits, co-payments, or specified conditions based on your chosen option. Day-to-day claims are paid directly from the AFB.



Above Threshold Benefit (ATB)

Once your AFB insured benefits are depleted, you enter the Self-Payment Gap, where you are liable to fund your day-to-day expenses until you reach the Annual Threshold. GP and specialist consultations, prescribed acute medication, radiology and pathology will accumulate to the Annual Threshold. Once you reach the Annual Threshold, the ATB becomes available.

The ATB provides additional benefit amounts for specified medical expenses.

Day-to-day benefits	AFB: Day-to-day benefits are first paid from the AFB: P: R22 050 A: R16 800 C: R6 100 (To a maximum of 3 children.) SPG: A Self-Payment Gap is applicable once the AFB is depleted and before the Annual Threshold is reached. Thereafter the ATB becomes available. The annual SPG amounts are: P: R5 000 A: R3 000 C: R1 000 (GP and specialist consultations, prescribed acute medication, radiology and pathology will accumulate to the Annual Threshold and then paid from the ATB.) ATB: Once the Annual Threshold is reached.	Chronic medicines (27 CDL conditions) Medicine for non- CDL conditions	100% of reference price. First paid from the AFB. The Scheme will cover the costs once the AFB is depleted. Subject to formularies, protocols and pre-authorisation. 25% co-payment for non-formulary medicine. 47 non-CDL conditions. 100% of reference price. First paid from available AFB and SPG. Unlimited. Subject to formularies, protocols and pre-authorisation. 25% co-payment for non-formulary medicine. Cover is also provided for the 27 listed CDL conditions.
the following ATB amounts become available for specified day-to-day expenses: PB: R11 250 PF: R23 000.	Acute medicines	Subject to the AFB, SPG and ATB. 25% co-payment on medicines where no generic is available.	
General practitioner Virtual and face-to- face consultations, procedures and material costs	100% of the scheme rate. First paid from the AFB, SPG and then the ATB once the Annual Threshold is reached.	Over the counter medication and homeopathic medicines	MMAP applies. 100% of the scheme rate. Paid from the AFB. Limited to a maximum of R1 250 PB and R1 800 PMF and one prescription per day up to a maximum of R315
Specialists	150% of the scheme rate. Paid from the AFB, SPG and then from ATB. Accumulates to the Annual Threshold		per event. MMAP applies. ATB: No benefits.
	at 100% of Scheme tariff. Referral by a GP is required, and pre- authorisation is required to avoid a 35% co-payment.	Basic radiology Black and white X-rays and ultrasound	100% of the scheme rate. Paid from the AFB and SPG, thereafter from the ATB. Referral by a GP is required to avoid a 35% co-payment.

Day-to-Day Benefits (continued)

All specialised 100% of the scheme rate. Surgical and medical 100% of the scheme rate. radiology Paid from the AFB. Unlimited appliances Including MRI and CT Pre-authorisation and medical E.g. wheelchairs, Sub-limits and protocols apply. motivation are required for MRI, CT and high-resolution CT scans. scans crutches, glucometers, artificial eyes and external fixators. Pre-R3 800 co-payment applies for each scan. authorisation is required. Referral by a GP is required to avoid a 35% co-payment. **Psychosocial** Paid from risk. Unlimited telephonic counselling counselling benefit **Pathology** 100% of the scheme rate. sessions through the Universal Paid from the AFB and SPG, thereafter Wellness Care Centre, with an option from the from the ATB. for referral to one-on-one sessions with Referral by a GP is required to avoid a qualified psychologists, social workers or 35% co-payment. registered counsellors to a maximum of 3 referral sessions PB per year. 100% of the scheme rate. Subject to the AFB and SPG. Limited to R6 700 PB and subject to available AFB. Conservative dentistry 100% of the scheme rate. Including consultations, Oxygen home Paid from the AFB. preventative care, fillings, ventilation extractions including Subject to protocols and pre-authorisation. wisdom teeth, root canal ATB: treatment and infection No benefits. Home nursing visits 100% of the scheme rate. Limited to 60 days PMF. control Nursing services by registered nurses or Paid from the AFB. Specialised dentistry 100% of the scheme rate. nursing assistants for Subject to protocols and pre-authorisation. First paid from the AFB and SPG Including maxillofacial the acute phase after and oral surgery-Subject to a sub-limit of R18 000 PB hospitalisation or in in-and-out of hospital and R24 000 PMF lieu of hospitalisation combined benefit Subject to protocols. (not for custodial or (A quotation must chronic care) be submitted for No benefits. approval prior to the Antenatal classes 100% of the scheme rate. commencement of the Subject to the AFB. treatment. Orthodontic treatment for patients older than 18 is Limited to 12 antenatal classes and a lactation consultation with a midwife and limited to R1 800 per pregnancy. excluded.) Antenatal visits 100% of the scheme rate. Limited to 12 antenatal visits with a GP, Optometry visits Paid from the AFB. specialist or midwife. Two visits PB per annum. ATB: First paid from the Care Maximiser. No benefits. Antenatal scans and Foetal scans limited to 2 x 2D scans PB Lenses and contact 100% of the scheme rate. maternity bag per year and you can opt for a 3D scan Paid from the AFB, subject to a sub-limit (paid at the rate of a 2D scan). Maternity of R5 900 PB. bag issued with registration on maternity Subject to protocols. programme. ATÉ: International travel Subject to benefits per individual benefit No benefits. Healthcare services category. while traveling outside Paid at South African rates. **Frames** 100% of the scheme rate. Paid from the AFB, subject to a sub-limit of R3 000 per frame.

One frame PB every 12 months (from date of service), included in the benefit Register your journey and obtain a travel of the borders of South Africa certificate on www.tic.co.za/compcare Emergency room One additional visit at an emergency limit for lenses. child benefit room per annum per child younger than 6 years. Speech therapists, 100% of the scheme rate. Visit to emergency room is limited to R1 550 per event. social workers, Paid from AFB. podiatrists, occupational Subject to a combined sub-limit of Paid from the Care Maximiser. R12 500 PMF, in-and-out of hospital. therapists, homeopaths and naturopaths, ATB: **Emergency** 100% of the scheme rate. In nonroadside assistance emergency cases, authorisation must be dietitians, chiropractors No benefits. obtained from Netcare 911 at the time (X-rays excluded), and ambulance transportation provided of transportation or within 24 hours audiologists, physiotherapists and by Netcare 911 thereof, failing which will result in a 25% biokineticists co-payment. Clinical psychologists Hospital emergency Paid from the AFB. 100% of the scheme rate. Clinical psychologists Paid from the AFB up to a sub-limit of room and casualty and psychiatry emergency visits not R6 260 PMF. requiring admission. Psychiatry Excluding facility fees Paid from the AFB up to a sub-limit of R22 960 PMF. PMB benefit: Up to a maximum of 21 Hospital emergency 100% of the scheme rate. as a result of physical Subject to protocols and PMBs. days' admission injury caused by an

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15 consultations. The 15 consultations will first be paid from the AFB, thereafter

it is covered by the Scheme.

external force



Hospitalisation

and major benefits

Extensive hospital and major benefit cover ensure financial protection in case of medical emergencies, covering hospital stays, surgeries and other life-saving medical procedures. For any hospital stay it is important to obtain pre-authorisation to avoid unnecessary out-of-pocket expenses. All hospital visits and related treatment are subject to case management, specialist programmes and Scheme protocols. These measures are put in place to ensure that members obtain quality, appropriate care at specially negotiated tariffs.

Hospitalisation

100% of the scheme rate. Any private hospital. Subject to pre-authorisation and managed care protocols.

GPs and specialist treatment while in hospital

Unlimited.
Specialists paid at 150% of the scheme rate (excluding dental treatment) and GPs paid at 100% of the scheme rate.

Medication - only while in hospital

100% of scheme rate.

Medication on discharge from hospital (TTO) Limited to 7 days per discharge. Subject to Reference Pricing (RP) and formularies.

Surgical prostheses

Subject to pre-authorisation and protocols. Limited to an overall benefit amount of R60 000.

Sub-limits per category apply.

Auxiliary services such as physiotherapy, psychology, etc. 100% of the scheme rate. Limited to a combined sub-limit of R12 500 PMF, in-and-out of hospital. Subject to pre-authorisation and protocols. A separate pre-authorisation number is required - the claim will not be paid as part of the hospital pre-authorisation. A 20% co-payment will apply if not pre-authorised.

Psychiatric treatment in hospital 100% of the scheme rate. Subject to preauthorisation, protocols and PMBs. Up to a maximum of 21 days' admission OR

15 consultations which will first be paid from the AFB (where applicable), thereafter it is covered by the Scheme.

Psychology (non-psychiatric admissions) Limited to R5 740 PMF. Subject to pre-authorisation and protocols.

All specialised radiology including MRI and CT scans

Basic radiology

Administered by

100% of the scheme rate. Unlimited. Pre-authorisation and medical motivation required for all MRI, CT Scans and high Resolution CT Scans. Subject to scheme protocols. No benefit for unauthorised scans, except for PMBs. R3 800 co-payment for each scan.

100% of the scheme rate. Unlimited. Subject to protocols.

Universal

Pathology

100% of the scheme rate. Unlimited.

Subject to protocols.

Confinements

100% of the scheme rate. Unlimited.

Subject to protocols.

Alcoholism, drug dependence and narcotics

Unlimited for PMBs. Subject to pre-authorisation and protocols.

Organ transplants, plasmapheresis, renal dialysis

Unlimited for PMBs. Subject to pre-authorisation and protocols. A DSP may apply.

sis A DSP may apply

Professional sports injuries

100% of the scheme rate. Subject to pre-authorisation and

protocols.

Oncology including chemotherapy and radiotherapy

100% of the scheme rate. Unlimited at our oncology DSP. Subject to pre-authorisation and protocols.

Oncology formulary applies.

Biologicals and specialised medication Pre-authorisation required. R360 000 PMF. Subject to pre-authorisation and

protocols.

Alternatives to hospitalisation

Step-down nursing facilities, hospice, rehabilitation and home-based care in lieu of hospitalisation

100% of the scheme rate. Unlimited. Subject to pre-authorisation, clinical

guidelines and protocols.

Surgical procedures outof-hospital 100% of the scheme rate. Unlimited.

Subject to pre-authorisation, clinical guidelines and protocols.

Refractive Eye Surgery Annual limit of R9 390 per eye. Subject to pre-authorisation and protocols. Limit includes all services rendered: Hospitalisation and all related costs.

Wound care in lieu of hospitalisation

100% of the scheme rate. Unlimited.

Subject to pre-authorisation, clinical

guidelines and protocols.



Important to remember: This is a summary of the benefits. For full details, please consult the official Rules of CompCare Medical Scheme (subject to approval by the Council for Medical Schemes). In case of a dispute, the rules of CompCare Medical Scheme will apply.

Benefits for members joining during the year will be prorated.

Always use a network hospital (where applicable) to avoid co-payments. In an emergency, go to the closest appropriate network hospital. If none are nearby, you may go to the nearest appropriate facility. For any procedures requiring a specialist, it's crucial to ensure that the specialist operates or attends to you at a network hospital. A 35% co-payment will apply to the voluntary use of a non-DSP/network hospital/facility.